UNITED STATES DISTRICT COURT

for the

_____ District of _____

_____ Division

Case No. _____

(to be filled in by the Clerk's Office)

_____

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

_____

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Jury Trial: *(check one)* ☐ Yes ☑ No

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name: Stephen Paul Watson
Address: 101 Rainbow Drive #11203
Livingston (City) TX (State) 77399 (Zip Code)
County: Polk County
Telephone Number: 469-753-6945
E-Mail Address: stevepwats@gmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name: US Department of Justice
Job or Title *(if known)*:
Address: 950 Pennsylvania Avenue, NW
Washington, D.C. (City) DC (State) 20530-0001 (Zip Code)
County:
Telephone Number: 202-514-2000
E-Mail Address *(if known)*:

☐ Individual capacity ☑ Official capacity

Defendant No. 2

Name:
Job or Title *(if known)*:
Address:
City State Zip Code
County:
Telephone Number:
E-Mail Address *(if known)*:

☐ Individual capacity ☐ Official capacity

Defendant No. 3

Name _____

Job or Title *(if known)* _____

Address _____

_____ _____ _____
City *State* *Zip Code*

County _____

Telephone Number _____

E-Mail Address *(if known)* _____

☐ Individual capacity ☐ Official capacity

Defendant No. 4

Name _____

Job or Title *(if known)* _____

Address _____

_____ _____ _____
City *State* *Zip Code*

County _____

Telephone Number _____

E-Mail Address *(if known)* _____

☐ Individual capacity ☐ Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971)*, you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against *(check all that apply)*:

☑ Federal officials (a *Bivens* claim)

☐ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

_____

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

Bivens claim; 18 U.S.C. 242; Fourth, Fifth, Eighth, 13th, 18th Amendments; Title VII Civil Rights Act 1964; Posse Comitatus Act

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

The discovery process is needed to glean more info on the state actors committing excessive force, color of law offenses and and those who gave authorization to commit said acts. This is due to the stealth, remote control nature of the weaponry because it uses directed energy. Example: Sheriff, Attorney General, FBI Director, NIJ, Joint Intermediate Force Capabilities Office, DoD director, Raytheon Company AKA RTX et al.

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. Where did the events giving rise to your claim(s) occur?

Beaumont, California (03-20-25); El Paso, Texas (03/25/25; 05/02/25); Dallas, Texas (04/21/25); Silver City, New Mexico (06-17-25, 2228 PM); Albuquerque, New Mexico (06-21-25); Pasadena, California (07/01/25); Woodland Hills, LA, CA (07/09/25); West Hills, CA (07/10/25); Azusa, California (07-22-25); Reno, Nevada (7/29/25);

B. What date and approximate time did the events giving rise to your claim(s) occur?

03/20/25, 0538 AM; 03/25/25, 0922 AM; 05/02/25, 0252 AM; 04/21/25, 0352 AM; 06/17/25, 2228 PM; 06/21/25, 0234 AM; 07/01/25, AM hours; 07/09/25, AM hours; 07/10/25, AM hours; 07-22-25 AM hours; 7/29/25, 0359 AM;

C. What are the facts underlying your claim(s)? *(For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)*

When visiting my Mom who lives at Arbor Vista retirement home during the morning on July 1st I felt directed energy causing pain to the stomach that caused incontinence. Audible clicks were heard on my car's dashboard followed by the sensation of pain. My Mom who I picked up describes the same, which she calls "high frequency" disturbing her sleep, her feet are targeted during the night causing pain making it hard for her to walk needing the aid of a walker. She also needs frequent trips to the bathroom and farts in public as if the directed energy is intended to degrade. I also get electronic surveillance abuse like overheated laptop and smart phone interefering with work. I also report skin irritants put inside the my car when I'm away from my car. I believe the perpetrators using directed energy are law enforcement, state actors, which is termed intermediate force or directed energy intermediate force capabilities (DE IFC). I believe I was put on the terrorist watch list for harassment and targeted over free speech like research, and the expression of ideas. The National Institute of Justice, contractor RTX, tested the mmWave, Assualt Intervention Device (AID), meeting state action requirement.

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.
Loss of consortium, emotional distress (IIED), negligent infliction of emotional distress (NIED), loss of enjoyment of life, pain and suffering. I went to see a cardiologist, radiologist, optomotrist, general practiononer, dentist, dermatologist because of bio-effects and the reasonable belief the the use of force, intermediate force could cause irreversable harm or death.

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.
I, Stephen Paul Watson, want the court to grant permanent injuctive relief due to suffering, irreparible harm so the abuse by state actors (law enforcement, FBI, Joint Terrorism Task Force et al.) stops and my rights and that of targeted family members are no longer violated. Family members I'm seeking injuctive relief for are: Karen Ann Day (mother), Gene Anthony Watson AKA Gino Antonio Vescio (father), Teresa Watson (sister), Alice Watson (sister), Christa Watson (sister, disabled), Esther Pearl Watson (sister), Lilly Todd (niece), Jocelyn Tucker (niece). I'm also requesting non-economic compensatory damages in the sum of $75,001 for pain and suffering, emotionaly distress, and loss of enjoyment of life. I'm seeking punitive damages in the sum of $75,000 for negligence.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case–related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: _____

Signature of Plaintiff _____

Printed Name of Plaintiff _____

B. For Attorneys

Date of signing: _____

Signature of Attorney _____

Printed Name of Attorney _____

Bar Number _____

Name of Law Firm _____

Address _____

_____ _____ _____
City *State* *Zip Code*

Telephone Number _____

E-mail Address _____

Print Save As... Add Attachment Reset